

NELAC V Conference Pre-Registration Form

Name _____

Title _____

Company/Organization _____

Address _____

City _____

State _____ Zipcode _____

Phone () _____ Fax () _____

E-mail _____

Enclosed is a check or money order for:

☐ \$125 for early registration (postmarked by June 1)

☐ \$150 for registration after June 1

☐ \$30 for banquet

Note that attendees may register in advance or on arrival at the Conference. However, payment for the banquet **must be received by June 1, 1999.**

_____ Yes, I will attend the ELAB meeting on June 30, 1999.

_____ Yes, I will attend the NELAP Accrediting Authority Assessor Training on June 26 - June 27, 1999. Please register me now for the training. I understand this training is offered to State and federal officials only.

_____ I am attending NELAC for the first time.

Send payment by check payable to **HEALTH RESEARCH INC.**, with this form to:

ELAP, New York State Department of Health
Wadsworth Center
PO Box 509
Albany, NY 12201-0509

Please check all that apply.

_____ I am attending NELAC V as a voting member.

_____ I am attending NELAC V as a Contributor.*

If you are a voting member:

_____ I will vote as a Designated Representative.

_____ I will vote as the Alternative Representative.

_____ I will vote as a Delegate.

_____ I have responsibilities in laboratory accreditation.

_____ I have responsibilities in environmental regulation.

**You are a Contributor if you represent a laboratory, manufacturer, industry, business, consumer of laboratory services, academia, laboratory associations, counties, municipalities, and other political subdivisions of States, Territories and Possessions of the United States, other federal officials not engaged in environmental activities, and other persons who are interested in the objectives and activities of NELAC*

Government

_____ County

_____ Local

_____ State

_____ EPA

_____ Indian Tribe

_____ Other Federal

Private Sector

_____ Private Laboratory

_____ Accreditation Body

_____ EPA Regulated Industry

_____ Environmental Group

_____ Academia

_____ Other (please specify) _____

ATTENTION ATTENDEES

- Registration (check or money order) **must be postmarked by June 1 to qualify for the \$125 rate.** Purchase requisition accepted from State and federal government agencies.
- Payment for the Conference Banquet **must be made in advance no later than June 1, 1999.**
- Registration fee includes: all committee meetings, networking sessions with breakfasts on Tuesday, Wednesday and Thursday, breaks and a set of NELAC standards.
- Send payment and registration form to the address on the registration form. Written cancellation for refund must be received no later than June 25, 1999.

For additional registration forms, please copy this form and submit a separate registration for each individual wishing to attend NELAC V.

For more information contact:

New York State
Environmental Laboratory Approval Program (ELAP)
(518) 485-5570